

02/15/01

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	FUJO 18.314
First Inventor	Y. IGARASHI
Title	MOBILE COMMUNICATIONS SERVICE PROVIDING....
Express Mail Label No.	EL522394161US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
- ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
- ☒ Specification [Total Pages **124**]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
- ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **76**]
- Oath or Declaration [Total Pages **4**]
  - ☐ Newly executed (original or copy)
  - ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
    - ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- ☐ Application Data Sheet. See 37 CFR 1.76

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

## ACCOMPANYING APPLICATION PARTS

- ☒ Assignment Papers (cover sheet & document(s))
- ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
- ☐ English Translation Document (if applicable)
- ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
- ☒ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
- ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- ☐ Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group Art Unit: \_\_\_\_\_  
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label **026304** or ☐ Correspondence address below  
(Insert Customer No. or Attach bar code label here)

Name				
Address				
City	State	Zip Code		
Country	Telephone	Fax		

Name (Print/Type)	Samson Helfgott	Registration No. (Attorney/Agent)	23,072
Signature			Date 2/14/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

02/14/01  
Jc996 U.S. PTO

Jc996 U.S. PTO  
09/783185  
02/14/01

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>FEE TRANSMITTAL</b> <b>for FY 2001</b>  <i>Patent fees are subject to annual revision.</i>		<b>Complete if Known</b>	
		Application Number	
		Filing Date	
		First Named Inventor	Y. IGARASHI
		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$ 990.00)	
		Attorney Docket No.	FUJO 18.314

<b>METHOD OF PAYMENT</b>		<b>FEE CALCULATION (continued)</b>	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 08-1634 Deposit Account Name: Helfgott & Karas, P.C. <input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES	
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other			
<b>FEE CALCULATION</b>			
1. BASIC FILING FEE			
Large Entity Small Entity			
Fee Fee Fee Fee Fee Description Fee Paid			
Code (\$) Code (\$) Code (\$) Code (\$) Code (\$)			
101 710 201 355 Utility filing fee			
106 320 206 160 Design filing fee			
107 490 207 245 Plant filing fee			
108 710 208 355 Reissue filing fee			
114 150 214 75 Provisional filing fee			
SUBTOTAL (1) (\$ 710)			
2. EXTRA CLAIM FEES			
Total Claims 15.00 -20** = 3.00 x 18.00 = 54.00			
Independent Claims 6.00 -3** = 3.00 x 80.00 = 240.00			
Multiple Dependent			
Large Entity Small Entity			
Fee Fee Fee Fee Fee Description Fee Paid			
Code (\$) Code (\$) Code (\$) Code (\$) Code (\$)			
103 18 203 9 Claims in excess of 20			
102 80 202 40 Independent claims in excess of 3			
104 270 204 135 Multiple dependent claim, if not paid			
109 80 209 40 ** Reissue independent claims over original patent			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$ 240)			
*or number previously paid, if greater; For Reissues, see above			
		SUBTOTAL (3) (\$ 40)	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Samson Helfgott	Registration No. (Attorney/Agent)	23,072
Signature		Telephone	212-643-5000
		Date	2/14/01

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.